SPECIAL PERMIT / SITE PLAN REVIEW CHECKLIST

Location of Subject Property:			Zone:
Is the lot situated in a Historic District?	; On a Scenic Road?		
	Required	Existing	Proposed
Area			
Frontage			
Depth			
Front Yard Setback			
Side Yard Setback			
Side Yard Setback			
Rear Yard Setback			
Building Coverage			
Building Height			
Gross Floor Area of Building(s) on Site			
Floor Area Ratio (FAR)			
Landscape Surface Ratio (LSR)			
Pervious Surface Area			
Impervious Surface Area			
Wetlands Area			
Landscape Buffer			
Parking Spaces			
Use of Property			
	1	1	
Reasons for Hearing:			
Description of Project:			

The following plans, reports and information must be submitted with this form in order for your application to be deemed complete. Provide justification for any required waivers.

	Attached	Not Attached	Waiver	
Locus Plan				
Building Elevations				
Traffic Impact Assessment				
Drainage Assessment				
Signage				
SUMMARY OF FISCAL IMPAC Current assessed value of site:	CTS:	\$		
Estimated value of improvements	:	\$		
Current total local tax revenue fro	om site:	\$		
Estimated post-development local	I tax revenue:	\$		
Estimated number of jobs created: during constru		ruction:	_; post construction:	
The Planning Board and/or Zoning Board of Appeals is entitled to rely on this representation as being the full and complete statement of the applicant(s)/owner. Therefore, the undersigned certifies that the information provided on this application and any attached plans/documents is a true and accurate representation of facts pertinent to the subject parcel of land.				
Applicant's Signature:			Date:	
Owner's Signature:			Date:	